



02-16-06
CPA/3739
WLM CV

CONTINUED PROSECUTION APPLICATION (CPA REQUEST TRANSMITTAL)

Check Box, if applicable:
 Duplicate

Assistant Commissioner for Patents
Box CPA
Washington, DC 20231

Attorney Docket No. 071340.0018
First Named Inventor: David H. McDaniel
Express Mail Label No. EL098882568US
Total Pages of Transmittal Form: 2

**NEW TITLE: PROCESS FOR INHIBITING ACTIVITY, REDUCING SIZE &
DESTROYING GROWTH OF SEBACEOUS GLAND**

This is a request under 37 CFR 1.53(d) for a continued prosecution application (CPA) which is a
[] Continuation or [X] Divisional of pending prior application 09/203,178, filed on **November
30, 1998**. **Cancel all prior claims except claims 12-15.**

Anticipated Group/Art Unit 3739, or Class &@, Subclass &@.

[] Enter the unentered Amendment previously filed on &@ under 37 CFR 1.116 in the
pending non-provisional application.

[] Request for Nonpublication of Application Under 35 U.S.C. §122(b) (37 C.F.R.
§1.213(a)).

[X] Substitute Specification (filed with original application).

[X] A Preliminary Amendment is enclosed.

[] This application is filed by fewer than all the inventors named in the pending application,
37 CFR 1.53(d)(4). Delete the following inventor(s) named in the prior non-provisional
application: &@; &@.

[] A new Power of Attorney is enclosed.

[X] Previously filed Information Disclosure Statement, PTO-1449 and cited references are
enclosed.

[X] Previously filed formal drawings are enclosed.

[] A Petition for Extension of Time along with requisite fee is enclosed.

[X] Applicant(s), by its/their undersigned attorney, claim(s) Small Entity Status under 37
C.F.R. §1.27 as [] an Independent Inventor, or [X] a Small Business Concern, or [] a
Non-Profit Organization.

[X] Other: Prepaid return postcard – please stamp & return.

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CPA REQUEST

The filing fee is calculated as follows:

			SMALL ENTITY			LARGE ENTITY	
CLAIMS	NO. FILED	NO. EXTRA	BASIC FEE: <u>\$355</u>			BASIC FEE: <u>\$710</u>	
Total	4-20 =	0	X\$9	\$	OR	X\$18	\$ 0.00
Independent	1-3=	0	X\$40	\$	OR	X\$80	\$ 0.00
Multiple Dependent Claim(s) Present			\$135	\$	OR	\$270	\$ 0.00
			TOTAL	\$	OR	TOTAL	\$355.00

A check in the amount of \$355.00 to cover the filing fee is enclosed.

The Commissioner is hereby authorized to charge and/or credit **Deposit Account No. 50-1017 (Billing No. 071340.0018)** as noted below. A duplicate copy of this sheet is enclosed.

Any overpayments or deficiencies in the above-calculated fee.

Filing fee in the amount of \$ _____ as calculated above.

Any additional fees required under 37 C.F.R. § 1.16 and § 1.17.

In the event that a Petition for Extension of Time is required during the prosecution of this application, but not submitted, please charge any extension fee under 37 C.F.R. § 1.136(a) to our Deposit Account noted above.

CORRESPONDENCE ADDRESS:

February 15, 2001
(Date)

By: Alex Chartove
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Enclosures